



**Environmental Management System Procedure**  
**for**  
**Evaluation of Compliance**  
**Applicable to the**  
**U.S. Army Garrison (USAG) Baumholder**

**18 November 2005**

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## Environmental Management System Documentation of the USAG Baumholder

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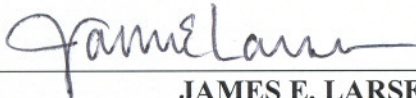
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**References:**

- a. Executive Order 13148, *Greening the Government through Environmental Leadership*.
- b. ISO 14001: 2004, *Environmental Management Systems – Specification with Guidance for Use*.
- c. EMS Procedure # EMS\_PBH\_09 – *Control of Environmentally Relevant Documents of the USAG Baumholder*
- d. Installation Management Agency – Europe Region (IMA-E), *Internal Assessment Plan Guidance (draft)*
- e. Memorandum, IMA-E, Subject: *FY05 Internal Environmental Performance Assessment (EPAS) Assessments Implementing Guidance and Reporting Requirements*, 7 July 2005.

## **1.1 PURPOSE**

The purpose of this procedure is to describe how the U.S. Army Garrison (USAG) Baumholder will conduct annual internal compliance evaluations.

## **1.2 APPLICABILITY**

This procedure applies to all personnel working within or on behalf of the USAG Baumholder involved in conducting internal compliance evaluations.

## **1.3 DEFINITIONS**

**IPAS** — Installation Management Agency – Europe Region (IMA-E) Performance Assessment Software – IMA-E mandatory software for use in conducting internal compliance evaluations.

**EMS Management Representative (EMSMR)** – An individual appointed by the Garrison Commander who, irrespective of other duties, is responsible for the operation of the Garrison's EMS and chairs the Garrison's Cross Functional Team (CFT).

## **2 PROCEDURE**

### **2.1 DEVELOPING/UPDATING INTERNAL ASSESSMENT PLAN**

The DPW EMO, in coordination with the EMSMR, shall develop an Internal Assessment Plan (IAP), following the requirements of Memorandum, IMEU-PWD-E, dated 23 Sep 2005, subject: FY05 Internal Environmental Performance Assessment System (EPAS) Assessments Implementing Guidance and Reporting Requirements and Memorandum, DAIM-ED, dated 18 Oct 2002, subject: Environmental Compliance Assessment System Internal Assessments – Policy Memorandum with enclosure, prior to conducting an internal compliance evaluation. A copy of the two memorandums are provided in Appendix A. An existing IAP should be reviewed and updated as necessary prior to initiating subsequent compliance evaluations. The IAP must be submitted to IMA-E for review.

### **2.2 CONDUCT COMPLIANCE EVALUATIONS FOLLOWING IAP**

The Garrison should conduct the compliance evaluations according to the IAP. Prior to actually beginning the evaluation, the Garrison will conduct a meeting for the internal compliance evaluation team. See Appendix B for an internal EPAS team meeting planner.

The IPAS must be used for documenting the compliance evaluation. The IPAS was provided to the Garrison from IMA-E. Additional electronic copies of the IPAS and IPAS User's Manual can be downloaded from the following website: <http://ima-euro.ursdcmetro.com/References.asp>.

### **2.3 DEVELOPING INSTALLATION CORRECTIVE ACTION PLANS (ICAPs)**

Using the IPAS the Garrison is to develop ICAPs following each internal compliance evaluation. Consult with the IPAS User's Manual for more detailed information regarding report functions. Generally, the ICAP should include at least the following information:

- Introduction, background and scope of the internal compliance evaluation (compliance evaluation objectives, general list of installations and facilities to be assessed, process used (IAP), team members and assignments)
- Detailed summaries of each media area evaluated
- Team activities (facilities visited and POCs interviewed)
- Findings by protocol (finding sheet index followed by individual finding sheets)

All ICAP projects must be correctly programmed into the Environmental Program Requirements (EPR) database with specific submissions being made in the spring and fall of each year.

### **2.4 BRIEFING GARRISON COMMANDER AND ENVIRONMENTAL QUALITY CONTROL COMMITTEE (EQCC)**

A summary of the Garrison's Internal EPAS findings and ICAPs must be briefed to the Garrison Commander and the Garrison's EQCC. This can be done as part of the annual EMS Management Review.

The Garrison Commander will submit a letter annually to IMA-E stating annual assessments have been completed and resulting ICAPs are reviewed and updated at their EQCC meetings.

## LIST OF APPENDICES

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## **APPENDIX A**

# **Applicable Environmental Compliance/Performance Assessment Guidance Memorandums**

**(DRAFT)**  
**INTERNAL ASSESSMENT PLAN**  
**GUIDANCE**

**Overview**

The Army is committed to full and sustained compliance with all applicable environmental and natural resource laws and regulations. Internal assessments are one of the most effective tools for understanding regulatory requirements and achieving compliance.

The internal assessment is considered to be a systematic, documented, objective, and comprehensive environmental compliance review of installation processes, facilities, and practices to be completed within a 12-month period. Installation personnel or their designees conduct the assessment.

This document is a guide for planning installation internal assessments. The planning should be developed by the installation's host activity, in coordination with its tenants. It documents how the activity plans to conduct an assessment within the "fenceline" over the course of a year. The installation Internal Assessment Plan (IAP) is a key element of the internal assessment. The IAP must address all applicable compliance requirements. The schedule is based on the identified environmental practices, assets, and impacts. Information is compiled from existing sources including plans, permits, inventories, program area managers' knowledge, and operation owners' knowledge. The information is organized and analyzed in a planning process to create the IAP. A suggested planning process is described in Section 1, and the suggested IAP format is described in Section 3.1.

Federal, state, and local compliance checklists are also essential ingredients of the internal assessment. The Environmental Compliance Assessment System (ECAS) software, fielded in July 2001, includes requirements as well as checklists to assist in documenting the environmental performance on the installation. The checklists, used in conjunction with the inventory practices, assets, and impacts of the installation should provide for a complete assessment of the environmental program.

The internal assessment process should provide for:

- Development and annual update of an IAP
- Compliance evaluations by environmental professionals to identify, characterize, and document compliance deficiencies related to individual practices and environmental programs
- Inspections of practices and associated environmental control measures by operation owners
- Problem solving to define compliance problems, analyze their causes, and then select, implement, monitor, and modify corrective and preventive actions to achieve specified results.

The personnel resources required to accomplish internal assessments should be assigned from both the installation's environmental offices and from those units owning operations to be assessed. Most installations have environmental specialists to

manage environmental program and media areas. Their technical training, familiarity with the installation's practices, assets, and impacts, and knowledge of applicable compliance requirements prepare them to plan and oversee the routine inspections of practices. Environmental specialists and their supervisors are also the people best prepared to conduct compliance evaluations of media and environmental program requirements.

Operation owners have the greatest stake in ensuring environmental compliance because their missions depend on continued availability of their business practices. The owners' expertise and knowledge of their own operations should be a resource applied to monitoring compliance with environmental requirements. Performing internal assessments as a team with the installation's environmental specialists should promote performance from both perspectives.

### **Section 1. Planning Internal Assessments**

To design and implement an IAP, installations can follow a ten-step process:

Step 1 - Determine the approach to conducting internal assessments.

Step 2 - Identify business and management practices, assets, and locations to be assessed.

Step 3 - Identify management requirements for specific media program areas.

Step 4 - Identify required inspections/monitoring.

Step 5 - Identify inspection priorities.

Step 6 - Determine frequency of internal assessments.

Step 7 - Assign personnel responsible for conducting internal assessments.

Step 8 - Schedule assessments.

Step 9 - Implement the IAP.

Step 10 - Maintain the IAP.

#### **1.1 Step 1 - Determine Approach to Conducting Internal Assessments.**

The heart of the internal assessment is the identification, characterization, and documentation of compliance and management system deficiencies. There are various approaches that may be used to accomplish this key part of the process. For example, a 1- or 2-week stand-down annually or semiannually to assess all program areas may be efficient and cost-effective for assessing smaller, less industrial installations. Another approach is to assess the hazardous waste program one month, the air program the next month, the wastewater program the next month, and so on, until all media programs are evaluated at least once per year. This "one a month approach" could also be applied to assessing tenants, particular types of facilities, or distinct areas or zones of an installation. On the other hand, a large industrial complex with numerous



(DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)

practices that have environmental impacts, or with multiple tenants may decide to implement continuous compliance evaluations and inspections throughout the year.

Table 1-1 summarizes a few possible approaches for conducting compliance evaluations. These approaches, combinations of these approaches, or techniques developed by individual installations or MACOMS can be applied under the flexibility inherent in the ECAS program. After proceeding with Steps 2 through 5, below, or later after gaining experience with their IAP, installations may want to revisit this step. The MACOM is responsible for evaluating the installation's approach to compliance evaluations and inspections for appropriateness, effectiveness, and efficiency.

Table 1-1 Various Approaches to Conducting Internal Assessments	
Approach	Schedule
Assessment stand-down	1-2 weeks, once or twice a year
Once a year, scheduled by month (i.e., by media, facility, tenant, zone, area)	1-5 days per month for assigned media, facility, tenant, zone, or area
Multiple times a year, scheduled by month (i.e., by media, facility, tenant, or area)	Multiple days per month
Once a year, year-round	Part of day-to-day business
Multiple times a year, year-round	Part of day-to-day business

This guidance illustrates the continuous compliance evaluation approach that conducts the internal assessment throughout the entire year.

At this point, the installation, in coordination with their MACOM, may decide whether to incorporate an Environmental Management System (EMS) review within the internal assessment and may plan for implementation of the EMS Review and problem solving, as discussed in Section 2.

**1.2 Step 2 - Develop an Inventory of Business and Management Practices, Assets, and Locations to be Assessed.**

After determining the overall internal assessment approach, the next step in internal assessment planning is to develop an inventory of practices, assets, and locations to be assessed. This inventory will provide the foundation for other internal assessment planning efforts and for developing an IAP. Possible techniques to ensure a comprehensive inventory include reviewing an installation's practices by building, area, activity or tenant, or media program. In addition, information may be available from existing sources including management plans, permits, inventories, program area/media managers, and operations owners. The inventory data and other information associated with the internal assessment planning effort (as discussed below) should be entered on an inventory form similar to the one presented as Table 1-2. The data gathered during this step should be entered in the "Program/Media Area," "Type of Practice, Asset, and Impact," and "Location" columns of the internal assessment planning summary form.

**(DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)**

Planning would be facilitated by marking/identifying the location of each facility, operation, or asset on an installation map. In particular, installations that maintain a Geographical Information System (GIS) may consider entering locations of practices and assets that require compliance evaluations or inspections along with pertinent information such as operation owner, practice type, point of contact, etc., to aid in planning. This will also help ensure that all practices, assets, and locations have been identified or reviewed.

**1.3 Step 3 - Identify Management Requirements for Specific Media Program Areas.**

In contrast to developing an inventory of practices and assets (Section 1.2), the many regulatory or policy requirements associated with the management of media program areas cannot usually be assigned to a specific location. However, the review of these management functions during internal assessments cannot be overlooked. Therefore, specific reviews of management functions required to ensure regulatory or policy compliance should be added to the inventory developed in Step 2 (and listed in the "Type of Practice" column of Table 2-2).

Examples of such management requirements include recordkeeping, training, management plan development, submitting notifications and permit applications, and developing and submitting funding requests to MACOMs.

Although the primary focus of internal assessment efforts is to determine if an installation is in compliance with regulatory requirements, the scope of the internal assessment may also include an evaluation of the effectiveness of the installation's EMS. If an EMS review is to be included within the scope of the installation's internal assessment, it should be included on the inventory (Table 1-2) and addressed when developing the IAP and internal assessment schedule (discussed below). Section 2.2 further discusses evaluation of management effectiveness.

**1.4 Step 4 - Identify Required Inspections/Monitoring.**

With appropriate training provided by the installation's environmental office, operation owners and other units could provide much of the inspection and monitoring effort. When these duties are fulfilled by others, the environmental office may plan to provide oversight, for example, by accompanying the owners on some inspections or reviewing inspection and monitoring results. Regardless of who performs the actual field work, the inspections and monitoring activities need to be identified and scheduled.

Many inspections and monitoring procedures and their frequencies are mandated by regulations, permits, or operating procedure. Specific examples include weekly inspections of hazardous waste storage areas, monthly monitoring of National Pollutant Discharge Elimination System (NPDES) discharges, and annual testing of back-flow preventers. This information should be documented in the "Inspection Frequency" column of Table 1-2. Required inspection frequencies are shown in parentheses in Table 1-2 so that they may be readily compared with the frequencies selected by the installation in Step 6.

**1.5 Step 5 - Identify Inspection Priorities.**

The following factors could be considered in focusing resources on practices, assets, and locations that should receive the greatest attention during inspections:

*Significance of Impacts* - "Impacts" are the effects of conducting business practices (i.e., including but not limited to operation and maintenance of industrial processes, pollution control equipment, mission-critical equipment, and facilities) and management practices (i.e., provision of environmental training, documentation of EMS-related activities, execution of the environmental project funding process, and implementation of management plans and procedures) on the installations vulnerable assets (i.e.,

## (DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)

Table 1-2 Sample Internal Assessment Planning Summary								
Program/ Media Area	Types of Practice	Location (Building number)	Inspection Frequency/ planned/ (required)	Inspection Responsibility	Local Priority	Compliance Evaluation Frequency	Compliance Evaluation Responsibility	Notes
Hazardous waste	Permitted HW storage facility	51	Weekly (Weekly)	Owner	High	Weekly	EMD HW/ manager	State Inspector scrutiny
	Satellite accumulation points (Host)	56,57,58	Weekly (Weekly)	Owner	High	Weekly	EMD HW/ manager	Compliance problem
		54,55,59	Weekly (Weekly)	Owner	Medium	Monthly	EMD HW/ manager	
		9,10,13,19,2 1,28	Weekly (Weekly)	Owner	Low	Quarterly	EMD HW/ manager	
	Satellite Accumulations points, (Tenant) RCRA-C program management	34,35,42,52, 53,64, 68, 69	Weekly (Weekly)	Owner	Low	Quarterly	EMD HW/ manager	
Air		1	None	None	High	Quarterly	EMD Chief	Reduce HW disposal cost 30% by FY 03
	Asbestos removal	22 (school)	Daily (Daily)	Owner	High	(Daily) 1/11- 1/22)	Safety Dept.	Asbestos removal- principal's officer
	Asbestos surveillance	22 (school)	Semi-annual	Owner	High	Quarterly	Safety Dept.	
	Air emission sources	22,33,44,77, 88	Monthly (Annually)	Owner	Low	Annually	EMD Air manager	
	CAA program management	1	None	None	Low	Annually	EMD Chief	
Waste- water	NPDES outfalls	61, 62, 63	Quarterly	Owner	Low	Quarterly	Facilities Dept.	
	Waste water treatment plants	12, 37	Weekly	Plant operators	Medium	Quarterly	Facilities Dept.	

## (DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)

Table 1-2 Sample Internal Assessment Planning Summary (continued)								
Program/ Media Area	Types of Practice	Location (Building number)	Inspection Frequency, planned/ (required)	Inspection Responsibility	Local Priority	Compliance Evaluation Frequency	Compliance Evaluation Responsibility	Notes
Waste- water (Cont.) ASTs	CWA program management	1	None	None	Medium	Annually	EMD Chief	Reduce permit exceedances by 50%
	Fuel off-loading facility	Pier 1	Daily (Monthly)	Owner	High	Weekly	EMD tank manager	High Spill potential
	Fuel farm	32 (tanks 32- 1, 32-2, 32-3, 32-4)	Monthly (Annually)	Owner	Medium	Monthly	EMD tank manager	Large quantity of POL stored
	AST's	3,11,17, 25, 31, 40, 48, 65, 78, 80, 84, 85	Monthly (Annually)	Owner	Low	Bi-annually	EMD tank manager	
USTs	UST's (Host)	15 (tanks 15- 1, 15-2, 15-3), 30 (tanks 30- 1, 30-2, 30-3)	Monthly (Monthly)	Owner	Low	Annually	EMD tank manager	New USTs just installed
	USTs (Tenant)	72 (tanks 72- 1, 72-1, 72-3, 72-4)	Monthly (Monthly)	Owner	Low	Quarterly	EMD tank manager	Older tanks due for replacement
	AST/UST program Management	1	None	None	Low	Annually	EMD Director	
Pollution Prevention	Recycling Center	14	None	None	Medium	Monthly	EMD P2 manager	
	Recycling drop-off points	36, 38, 45, 60, 82	None	None	High	Weekly	EMD P2 manager	Determine Usage
	P2 Initiatives	75, 76, 81, 89, 90	None	None	Medium	Monthly	EMD P2 manager	Evaluate Success
	P2 Program Management	1	None	None	High	Quarterly	EMD Chief	Implement 5 P2 projects in FY01

(DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)

Table 1-2 Sample Internal Assessment Planning Summary (continued)								
Program/ Media Area	Types of Practice	Location (Building number)	Inspection Frequency/ planned/ (required)	Inspection Responsibility	Local Priority	Compliance Evaluation Frequency	Compliance Evaluation Responsibility	Notes
PCBs	PCB storage facility	67	Weekly	Owner	Medium	Quarterly	EMD PCB manager	
	PCB Transformers (host)	43, 46	Quarterly	Owner	Medium	Quarterly	EMD PCB manager	Eliminate PCB use by FY99
	PCB Transformers (Tenant)	47, 49	Quarterly	Owner	Medium	Quarterly	EMD PCB manager	Eliminate PCB use by FY01
Potable water	Back-flow preventors (Host)	4, 16, 24, 73, 74	Annually	Owner	Low	Annually	EMD wastewater manager	
	Sanitary survey	Installation- wide	Annually	Owner	Low	Annually	Facilities Dept.	
Other	Infectious waste locations (Tenant)	29, 79	None	None	Medium	Monthly	EMD Chief	Compliance problems
	Culturally significant buildings	1, 2, 7, 26	None	None	Low	Semi- annually	EMD Chief	
	Natural resources area	Training areas, Lake Silver, McDowell Creek, Hatfield wetlands	None	None	Medium	Monthly	EMD Chief	
	Pesticide storage facility	66	None	None	Low	Annually	EMD Chief	
	EMS Review	1	None	None	High	Semi- annually	EMD Chief	

<sup>1</sup> Inspections required by Federal, State, or local regulations or permits; DoD or DA policy are shown in parentheses.

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health and safety; mission effectiveness; military training areas; sensitive environmental, historical, and cultural resources; real property; financial resources, and public relations status.) Determination of impacts is based on the identification of practices and vulnerable assets identified as part of the planning. Those ranked higher (i.e., have been determined to pose a higher risk for the installation) may need to be inspected/evaluated more frequently, while those that pose a lower risk may require less frequent scrutiny. The priority assigned by the installation to each practice and asset should be documented in the "Local Priority" column of Table 1-2.

*Previous Compliance Status* - If previous inspections or assessments have revealed compliance deficiencies or difficulties in achieving established goals and objectives, the installation may decide to increase the frequency of compliance evaluations for that site until personnel have corrected the deficiencies, improved their compliance status, or met EMS requirements. Conversely, those sites with a proven record of excellent compliance or adherence to EMS procedures may require fewer compliance evaluations and/or inspections.

*Frequency of Regulatory Inspections* - If particular media or areas are subject to increased scrutiny by state or local regulatory authorities, the installation may also choose to increase the frequency of compliance evaluation and/or inspections to ensure that staff maintains a high level of compliance awareness.

*Funding* - Installations may decide to increase assessments to ensure new funding is being applied in a most advantageous manner or to ensure a program that did not receive requested funding maintains compliance until funding is procured.

**1.6 Step 6 - Determine Frequency of Internal Assessments.**

Installation staff determines the frequency of compliance evaluations and inspections based on the required inspections documented in Step 4 and installation priorities established in Step 5. The roles of operations owners and units on the installation other than the environmental office may also be considered.

The frequencies of compliance evaluations and inspections should be entered into the respective columns of the internal assessment planning summary form (see Table 1-2). Information supporting these decisions can be entered in the "Notes" column.

**1.7 Step 7 - Assign Personnel Responsible for Conducting Internal Assessments.**

After completing Steps 1 through 6, installation managers should designate the personnel responsible for conducting the installation's compliance evaluations and inspections. As with other portions of the ECAS program, there is an inherent flexibility that allows the installation a variety of options in assigning personnel to conduct the compliance evaluations and inspections.

As indicated in the discussion of Step 4 above, a significant amount of the inspection responsibility may be assumed by operation owners. This is encouraged since the effort required to train the individuals who use the practices to inspect them will pay off

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twice: once in providing those individuals with an environmental perspective on their job performance, and again in decreasing the inspection effort required by the environmental office.

Compliance evaluations (including inspections that are not provided by operation owners) can be assigned in various ways. Some options include:

- Having either individuals or teams complete the compliance evaluations
- Performing the evaluations by either individual media area or across all media
- Having evaluators work only within their media of principle expertise or expand into other media.

Candidates for evaluations or evaluation teams include, but are not limited to:

- Environmental staff
- Operation owners
- Quality assurance, safety, facilities, medical or other installation staff.

All of these positions may not be present at every Army installation. Each installation should define inspection and evaluation responsibilities appropriate to the scope of its EMS, its compliance requirements, its organizational structure, and its available resources. These responsibilities are documented in the "Inspection Responsibility" and "Compliance Evaluation Responsibility" columns of the form presented as Table 1-2.

Any staff members that have the knowledge, training, and expertise to identify and document instances of both regulatory non-compliance and deviation from the installation's EMS are eligible to conduct compliance evaluations. The evaluators may be program managers or dedicated inspectors, subject matter experts (e.g., hazardous waste or air) who conduct inspections only at sites under their purview or multi-media experts who conduct assessments across all areas.

**1.8 Step 8 - Schedule Assessments.**

To facilitate scheduling of inspections and compliance evaluations, the information developed during the internal assessment planning process and entered into Table 1-2 should be transferred to a calendar format, which will help both evaluators and operation owners plan their time and efforts properly and ensure that appropriate staff are available.

The data presented in Table 1-3 represents the data contained in Table 1-2 associated with the hazardous waste management program. Installation personnel can schedule their work to meet their individual needs. Table 1-3 demonstrates how the hazardous waste program manager could schedule assessments to be conducted in January 2002.



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Table 1-3 reflects the following hypothetical installation-specific information:

- The permitted hazardous waste storage facility (Building 51) will be assessed on a weekly basis because of increased scrutiny by state regulators.
- Hazardous waste satellite accumulation points at Buildings 56, 57, and 58 will be assessed weekly due to continuing compliance deficiencies.
- Hazardous waste satellite accumulation points at Buildings 54, 55, and 59 will be assessed monthly due to the difficulty these sites are having in achieving EMS objectives. Buildings 9, 10, 13, and 19 will be assessed during January in accordance with the scheduled quarterly inspection of satellite accumulation points that have demonstrated excellent regulatory compliance.

<b>Table 1-3 Sample Internal Assessment Plan to be Conducted by Hazardous Waste Program Manager</b>				
<b>January 2002</b>				
<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>
3	4 <u>54, 55, 59*</u>	5	6 <b>51, 56, 57, 58</b>	7
10	11	12	13 <b>51, 56, 57, 58</b>	14
17	18 9, 10, 13, 19	19	20 <b>51, 56, 57, 58</b>	21
24	25 1	26	27 <b>51, 56, 57, 58</b>	28

**Weekly assessments are in bold.**

Monthly assessments are underlined.

*Quarterly assessments are in italics*

\* Numbers presented in Table 1-3 indicate building numbers where internal assessments will be conducted.

The hazardous waste management program (located in Building 1) will be evaluated during January in accordance with the scheduled quarterly assessments of environmental media management programs.

### **1.9 Step 9 - Implement the IAP.**

Implementation of the IAP is discussed in Section 2.

### **1.10 Step 10 - Maintain the IAP.**

Changes to the plan may be required due to a number of factors:

- Practices have been shut down/closed, moved, added, or changed significantly.
- Additional practices have been "discovered" during the previous year's assessments that must be included in future efforts.
- Experience with the internal assessment program has resulted in reconsideration of previously assigned priorities and frequencies.
- New regulatory or policy requirements.
- Environmental performance improved at particular practices or assets indicating that these locations may require less frequent inspections or compliance evaluations.
- Environmental performance deteriorated at particular practices or assets indicating that these locations may require more frequent inspections or compliance evaluations.

## **Section 2. Conducting Internal Assessments.**

### **2.1 Compliance Evaluations.**

The techniques and methodologies used to conduct compliance evaluations are the same used in any environmental audit. Commonly used tools and techniques to determine compliance include:

- Knowledge of and adherence to applicable environmental laws and implementing regulations

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- Review of and compliance with applicable permits and their monitoring and other conditions of compliance
- Use of checklists of requirements as a guide and to document inspections and assessments
- Interviews with shop personnel who participate in or manage a particular practice to determine both their knowledge or awareness of potential impacts and the procedures required to meet regulatory requirements
- Reviews of required documentation such as inspection forms, training certificates, waste turn-in forms, monitoring/analytical results, required management plans, and notifications
- Search for evidence of compliance such as proper labeling on drums, location of spill control materials, signs of spills or leaks, proper secondary containment, condition of storage containers/tanks, inspection tags on back-flow preventors, proper landfill cover, and properly functioning oil/water separators.

The Army has provided ECAS software as a tool to support internal assessments. The ECAS software provides checklists of Federal, state, local, and DOD requirements and can be used to document assessment findings, root cause/problem-solving decisions, recommended corrective/preventive actions.

**2.2 Evaluation of Management Effectiveness.**

An installation may opt to evaluate the effectiveness of its EMS as part of its internal assessment and in preparation for an external assessment, and will therefore be concerned with evaluating its conformance, at a minimum, with applicable local policy. Installations with mature EMSs in place may also elect to evaluate management system effectiveness against appropriate standards such as CEMP, ISO Standard 14001, or the Malcolm Baldrige quality criteria. Several management system evaluation techniques are available. The installation's environmental managers should select method(s) appropriate for their installation based on the maturity of the installation's EMS.

**2.3 Determining and Implementing Corrective/Preventive Actions - Problem Solving.**

The responsibility for identifying compliance deficiencies from the external auditors once every 3 years is shifting to the installation's staff on a continuous basis. The responsibility to implement corrective and preventive actions has always rested with the installation commander. External auditors will rely more on installations to identify deficiencies, and will now be reviewing where, how, and to what effect installations permanently solve the problems they discover during internal assessments.

"Problem solving," as used here, begins with the recognition that deficiencies observed during internal or external assessments do in fact constitute problems that require analysis and decision making to prevent recurrence. In other words, a problem is more

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than a symptom that can be immediately fixed. Problem solving ends with the intended results, i.e., continuing compliance with regulations or permit requirements, and conformance with the existing EMS.

Appendix A discusses various steps and approaches to problem solving that installation personnel could implement.

**3. Documenting Internal Assessments.**

The developed IAP should be documented.

**3.1 Internal Assessment Plan.**

The IAP is "the host activity's plan, coordinated with tenants, that describes how a comprehensive internal assessment will be accomplished within the "fenceline" over the course of a year."

The information presented in the IAP should be reviewed by the MACOM and could be used to determine the scope and frequency of future external assessments they will conduct at an installation. Therefore, installations should provide their MACOM with information demonstrating that they have initiated an active internal assessment program, which may result in reduced future MACOM oversight. To document the successful design and implementation of an internal assessment program, the IAP should contain the following:

- Description of the general approach to scheduling inspections and compliance evaluations (Section 1.1)
- Roles and responsibilities for implementing the inspections and compliance evaluations (Section 1.7); problem solving (Appendix A); and EMS Review if performed by the installation
- Summary of the planned inspections and compliance evaluations (Table 1-2).

These elements of the IAP are developed through the internal assessment planning process described in Sections 1.1 through 1.2.

**4.2 Internal Assessment Documentation.**

Documentation of the results of an installation's internal assessments includes:

- A brief summary of each program/media area (e.g., major facilities, permits, any special arrangements with regulators)
- A description of identified deficiencies
- Assigned root cause categories
- Recommended corrective actions.

The ECAS software allows for inputs of this information and can produce an Installation Corrective Action Plan (ICAP).

**(DRAFT) INTERNAL ASSESSMENT PLAN GUIDANCE (cont)**

Suggested distribution of the internal assessment documentation includes the Commanding Officer, Legal, Public Affairs, Public Works, and major tenants, as appropriate.

Two important reasons for documenting corrective actions are: 1) to provide a record of evidence considered and decisions made during problem solving, and 2) to enable external assessors to verify that the installation's EMS is functioning effectively. Documenting the problem-solving process is critical in case later reexamination becomes necessary. Documentation should be completed whether a deficiency is minor and warrants only an on-the-spot fix or is the focus of a structured problem-solving exercise.

The extent of the documentation should be directly proportional to the seriousness of the problem. For instance, for deficiencies that are not repeats, that could have only minor consequences, and that are therefore not considered to constitute a "problem," an on-the-spot fix recorded in the "Recommended Corrective Action" field of the ECAS software may be sufficient.

For deficiencies that do indicate "problems," any on-the-spot fixes and recommendations for subsequent actions should be documented in the recommended corrective action field of the ECAS software, and the situation should be analyzed sufficiently to select a root cause category. Root cause categories and problem solving are described in Appendix A. Concurrence on the selected root cause category should be obtained from the owning unit, the appropriate manager in the environmental office, and any other interested parties on the installation.

If intuitive problem solving is judged sufficient to achieve permanent corrective or preventive actions, key assumptions and intuitive conclusions for each of the seven problem-solving steps (see Appendix A.3) could be recorded as a separate report and provided as a reference in the ECAS software.

For problems that warrant structured problem solving (see Appendix A.3), the above measures should be developed and the seven problem-solving steps should be documented. Separate documentation may also be prepared and referenced in the ECAS software. If the root cause category or the recommended corrective actions change as a result of proceeding through the steps, annotations in the ECAS software should be made to document the suggested changes.

## **APPENDIX B**

# **Applicable EPAS Assessments Implementing Guidance and Reporting Requirements**



**DEPARTMENT OF THE ARMY**  
INSTALLATION MANAGEMENT AGENCY  
EUROPE REGION  
UNIT 29353, BOX 200  
APO AE 09014

**JUL 07 2005**

IMEU-PWD-E

**S: 23 Sep 05**

MEMORANDUM FOR: See Distribution

SUBJECT: FY05 Internal Environmental Performance Assessment System (EPAS)  
Assessments Implementing Guidance and Reporting Requirements

1. Reference ACSIM DAIM-ED memorandum, dated 18 Oct 02, Subject: Environmental Compliance Assessment System Internal Assessments – Policy Memorandum (Encl 1).
2. Per the referenced ACSIM memorandum, garrisons must complete an annual Internal EPAS. This Installation Management Agency – Europe Region (IMA-EURO) implementing guidance memo establishes additional requirements for conducting Internal EPASs within the European Region. It also establishes the reporting requirements for your FY05 Internal EPASs.
3. Beginning in FY05, garrisons in Europe must use the IMA-EURO Performance Assessment Software (or IPAS) to conduct their Internal EPAS. This requirement was addressed in the Mar 04 Environmental In-Progress Review (IPR). To assist, IMA-EURO provided the IPAS software and User's Manual to each garrison Environmental Office in Jun 04 and software training was conducted in 1<sup>st</sup> QTR FY05. The IPAS software incorporates FGS-based protocols for use in conducting your Internal EPAS. Additional electronic copies of the protocol manuals, IPAS software, and IPAS User's Manual can be downloaded from this website: <http://ima-euro.ursdcmetro.com/References.asp>.
4. An Internal EPAS can be conducted using various methods. The most efficient method is to perform the Internal EPAS over the course of the year, utilizing your garrisons' existing routine inspections (e.g., weekly inspections of hazardous waste storage areas; annual site inspections of hazardous material use and storage areas to update your Stormwater Pollution Prevention Plan; etc.) and documenting the findings in the IPAS software. Many of the garrisons adopted this approach in their Installation Assessment Plans (IAPs), submitted to IMA-EURO in late FY03. Upon completion of your FY05 Internal EPASs, we encourage the garrisons to review their IAPs. Garrisons may need to revise their IAPs to capture lessons learned from their FY04 and FY05 Internal EPASs.
5. Your Internal EPASs should be accomplished using garrison personnel. Contracted staff, such as your Pollution Prevention (P2) and Environmental Management System (EMS) contractors, may assist in limited protocol areas, but it is HQDA's intent that the effort be accomplished by garrison staff. A multidisciplinary team from multiple garrison organizations (e.g., Environmental, Operations and Maintenance, Safety, Logistics, Plans) will help emphasize that environmental compliance is the responsibility of all garrison organizations. Utilization of your garrison staff will also strengthen their relationship with tenant organizations, in turn improving your overall compliance posture.
6. Per the referenced ACSIM memorandum, garrisons must develop Installation Corrective Action Plans (ICAPs) to address their Internal EPAS findings. The IPAS software assists in development of the ICAPs, as the software includes tabs to enter selected corrective actions, EPR data, and

IMEU-PWD-E

Subject: FY05 Internal EPAS Implementing Guidance & Reporting Requirements

other pertinent data for each finding. The IPAS User's Manual provides more information on this software feature.

7. HQDA has developed a list of root causes based on the ISO 14001 standard for use in the EPAS program. These root causes are incorporated in the IPAS software and listed in Appendix C of the IPAS User's Manual. The root causes are intended to enhance the EPAS program and also feed into your Environmental Management System (EMS). More information on utilization of EPAS root causes in your garrison-level EMS will be provided in separate guidance for conducting your annual EMS Management Reviews. When developing your ICAPs, it is important to review the root causes for your findings to ensure that the root cause is also addressed. For example, a finding for improper labeling of a hazardous waste container may have a root cause of lack of training. The corrective action should address proper labeling for the container as well as providing training. A finding for improper handling of potential asbestos-containing brake pads at a motor pool may have a root cause of lack of an established standard operating procedure (SOP) for this activity. In this case, the corrective action should include developing the SOP and conducting training on the SOP for motor pool staff.


8. An annual Internal EPAS is required even in years when an External EPAS is conducted by IMA-EURO. Garrisons that had an External EPAS in FY05 are not expected to duplicate the External EPAS effort. However, at the minimum, the Internal EPAS for these garrisons should:

- Review the findings from the External EPAS
- Assess any areas or facilities that were not assessed during the week-long External EPAS
- Update the Corrective Action Plan to indicate the current status of the External EPAS findings and add the findings from the Internal EPAS
- Brief the updated Corrective Action Plan to the garrison Environmental Quality Control Committee (EQCC)

9. A summary of your garrisons' Internal EPAS findings and ICAPs to address those findings must be briefed to your garrisons' Environmental Quality Control Committee (EQCC). Upon completion of your EQCC briefings, Area Support Group Commanders must submit a letter to IMA-EURO reporting that your FY05 Internal EPASs have been completed and resulting ICAPs have been reviewed by your garrison EQCCs. Your reporting letter must also include a PDF of each garrison's Finding Sheet Index, which is one of the reports built into the IPAS software (see Appendix A of the IPAS User's Manual). To facilitate IMA-EURO's upward reporting for this requirement, ASG reporting letters must be received no later than 23 Sep 05.

10. Questions regarding the EPAS program and specific Internal EPAS requirements may be directed to Ms. Wanda Johnsen, EPAS Program Manager, IMA-EURO Environmental Office, DSN 370-6073, e-mail: [wanda.johnsen@ima-e.army.mil](mailto:wanda.johnsen@ima-e.army.mil).

Encl

  
E. DOUGLAS EARLE  
COL, TC  
Deputy Director

DISTRIBUTION:  
6th ASG, Attn: IMEU-STU-ZA, Unit 30401, APO AE 09107



**IMEU-PWD-E**

**Subject: FY05 Internal EPAS Implementing Guidance & Reporting Requirements**

22nd ASG, Attn: IMEU-VIC-ZA, Unit 31401, Box 80, APO AE 09630

26th ASG, Attn: IMEU-HEI-ZA, Unit 29237, APO AE 09102-9237

80th ASG, Attn: IMEU-CHV-ZA, CMR 451, APO AE 09708

98th ASG, Attn: IMEU-WUZ-ZA, Unit 26622, APO AE 09244

100th ASG, Attn: IMEU-GFW-ZA, Unit 28130, APO AE 09114

104th ASG, Attn: IMEU-HAN-ZA, CMR 470, APO AE 09165

**CF:**

221st BSB, Attn: IMEU-WSB-ZA, Unit 29623, APO AE 09096

222nd BSB, Attn: IMEU-BMH-ZA, Unit 23746, APO AE 09034

233rd BSB, Attn: IMEU-DAR-ZA, CMR 431, APO AE 09175

235th BSB, Attn: IMEU-ANS-ZA, Unit 28614, APO AE 09177

254th BSB, Attn: IMEU-SCH-ZA, Unit 21602, APO AE 09703

279th BSB, Attn: IMEU-BAM-ZA, Unit 27535, APO AE 09139

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282nd BSB, Attn: IMEU-HHF-ZA, Unit 28216, APO AE 09173

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293rd BSB, Attn: IMEU-MAN-ZA, Unit 29901, APO AE 09086

409th BSB, Attn: IMEU-VLK-ZA, Unit 28130, APO AE 09114

411th BSB, Attn: IMEU-HES-ZA, Unit 29245, APO AE 09102

414th BSB, Attn: IMEU-HAS-ZA, Unit 20193, Box 0003, APO AE 09165

415th BSB, Attn: IMEU-KAI-ZA, Unit 23152, APO AE 09227

417th BSB, Attn: IMEU-KZG-ZA, Unit 26137, APO AE 09031

## **APPENDIX C**

# **Applicable Environmental Compliance Assessment System Internal Assessments – POLICY MEMORANDUM**



DEPARTMENT OF THE ARMY  
ASSISTANT CHIEF OF STAFF FOR INSTALLATION MANAGEMENT  
600 ARMY PENTAGON  
WASHINGTON DC 20310-0600



REPLY TO  
ATTENTION OF

DAIM-ED (200-1a)

OCT 18 2002

MEMORANDUM FOR DIRECTOR, INSTALLATION MANAGEMENT AGENCY

SUBJECT: Environmental Compliance Assessment System Internal Assessments--  
POLICY MEMORANDUM

1. References.

a. AR 200-1, 21 February 1997, Environmental Quality, Environmental Protection and Enhancement.

b. Executive Order 13148, Greening the Government Through Leadership in Environmental Management, 26 April 2000.

c. AR 1-201, 17 May 1993, Army Inspection Policy.

d. Memorandum, DACS-ZB, 25 Feb 2002, subject: Installation Environmental Compliance.

2. This memorandum rescinds policy in reference 1a, paragraph 15-9c(1) allowing annual Installation Status Reports (ISR), Part II, Environment, to fulfill the annual installation internal assessment requirement of Army's Environmental Compliance Assessment System (ECAS) program. Requirements in AR 200-1, paragraph 15-9c(2) will now also apply to installations completing the ISR, Part II, Environment. Policy will become effective 1 Oct 2002 and be incorporated into next revision of AR 200-1.

3. During the ECAS In Progress Review in November 2000, consensus expressed by MACOM representatives was ISR Environment is not adequate to serve as an internal assessment. ISR Environmental's utility statement was changed during the July 2001 ISR After Action Review to reflect this realization.

4. Installations will develop Internal Assessment Plans to ensure requirements for internal assessments, stated in AR 200-1, are met. Guidance to establish an Installation Internal Assessment Plan (IIAP) is provided at Encl 1. This guidance provides flexibility to tailor plans to installation unique circumstances. Installations will submit plans to their respective Regional Headquarters by 1 October 2003.

5. Reference 1b, Section 402, paragraph (b) requires each agency to conduct internal reviews and audits. Installation internal assessments are a key part of the checking and corrective action component of an Environmental Management System (EMS) and essential to maintaining a strong compliance posture.

DAIM-ED

SUBJECT: Environmental Compliance Assessment System (ECAS) Internal Assessments – POLICY MEMORANDUM

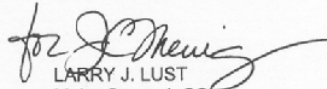
Internal Assessments should be included as an integral part of a commander's organizational inspection program (reference 1c, paragraph 3.2). Installation internal assessments are not intended to replicate external ECAS assessments. Internal assessments should be conducted by full-time in-house personnel as part of their regular checking and corrective action function.

6. A product of annual internal assessments are Installation Corrective Action Plans (ICAP). ICAPs are a functional element of ECAS software, Version I, to be fielded 1 Oct 2002 and available to all Army installations via the Internet at that time. Mandatory data fields are provided in Encl 2.

7. In reference 1d, the Vice Chief of Staff of the Army highlighted use of Environmental Quality Control Committees (EQCC) as an excellent forum for developing and executing ICAPs. Beginning FY04 Garrison Commanders will submit a letter annually to their Regional Headquarters stating annual internal assessments have been completed and resulting ICAPs reviewed and updated by their EQCC.

8. Office of the Director, Environmental Programs point of contact is Mr. Martin Elliott, DSN 223-0552 or (703) 693-0552; email: [Martin.Elliott@hqda.army.mil](mailto:Martin.Elliott@hqda.army.mil).

2 Encls

  
LARRY J. LUST  
Major General, GS  
Assistant Chief of Staff  
for Installation Management

CF:

DIRECTOR

DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY, EUROPE  
REGION, ATTN: SFIM-EU, UNIT 29353 BOX 200, APO AE 09014

DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY, KOREA  
REGION, ATTN: SFIM-KO, PSC 303 BOX 45, APO AP 96205

DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY,  
NORTHEAST REGION, ATTN: SFIM-NE, BUILDING 5A NORTH GATE RD, FORT  
MONROE, VA 23651-1047

DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY,  
NORTHWEST REGION, ATTN: SFIM-NW, 1 ROCK ISLAND ARSENAL, ROCK  
ISLAND, IL 61299-6200

DAIM-ED  
SUBJECT: Environmental Compliance Assessment System (ECAS) Internal  
Assessments -- POLICY MEMORANDUM

DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY, PACIFIC  
REGION, ATTN: SFIM-PA, 104 H PLACE, FORT SHAFTER, HI 96858-5520  
DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY,  
SOUTHEAST REGION, ATTN: SFIM-SE, 1593 HARDEE AVE SW, BLDG 171,  
FORT MCPHERSON, GA 30330-1057  
DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY  
SOUTHWEST REGION, ATTN: SFIM-SW, 1204 STANLEY RD, STE 9, FORT SAM  
HOUSTON, TX 78234-5009

US ARMY RESERVE:  
DEPARTMENT OF THE ARMY, INSTALLATION MANAGEMENT AGENCY, US ARMY  
RESERVE, ATTN: SFIM-AR, 1401 DESHLER ST, FORT MCPHERSON, GA 30330-  
2000

CHIEF  
U.S. ARMY NATIONAL GUARD, ATTN: NGB-CS, 111 S. GEORGE MASON DRIVE  
ARLINGTON, VA 22204  
U.S. ARMY RESERVE, 815 N. FORT MYER DRIVE, ROSSLYN, VA 22209-1808

COMMANDER  
U.S. ARMY LEGAL SERVICES AGENCY, ATTN: JALS-EL (MR. NIXON), 901 NORTH  
STUART STREET, SUITE 400, ARLINGTON, VA 22203-1837  
U.S. ARMY ENVIRONMENTAL CENTER, ATTN: SFIM-AEC-EQS (MR. ANDREWS),  
5179 HOADLEY ROAD, ABERDEEN PROVING GROUND, MD 21010-5401  
416<sup>TH</sup> ENGINEER COMMAND, ATTN: AFRC-ENIL-FE (LTC DIETZ), 10 S 100  
SOUTH FRONTAGE ROAD, DARIEN, IL 60561-1780

COMMANDANT, U.S. ARMY LOGISTICS MANAGEMENT COLLEGE, ATTN: ATSZ-  
LSE (MR. HAMILTON), BUILDING 12500, 2401 QUARTERS ROAD, FORT LEE, VA  
23801-1705

DIRECTOR, U.S. ARMY CONSTRUCTION ENGINEERING RESEARCH  
LABORATORIES, ATTN: CEERD-CN-E (DR. SCHELL), P.O. BOX 9005,  
CHAMPAIGN, IL 61826-9005

CHIEF  
CENTRAL REGIONAL ENVIRONMENTAL OFFICE, ATTN: SFIM-AEC-CR  
(MR. IVES), 601 EAST 12<sup>TH</sup> STREET, SUITE 647, KANSAS CITY, MO  
64106-2896  
NORTHERN REGIONAL ENVIRONMENTAL OFFICE, ATTN: SFIM-AEC-NR  
(DR. HARTMAN), 5179 HOADLEY ROAD, ABERDEEN PROVING GROUND, MD  
21010-5401

**DAIM-ED**

**SUBJECT: Environmental Compliance Assessment System (ECAS) Internal Assessments – POLICY MEMORANDUM**

**SOUTHERN REGIONAL ENVIRONMENTAL OFFICE, ATTN: SFIM-AEC-SR  
(MR. CARELLAS), ARMY ENVIRONMENTAL TECHNICAL INSTITUTE, 101  
MARIETTA STREET, NW., SUITE 3120, ATLANTA, GA 30303-2711  
WESTERN REGIONAL ENVIRONMENTAL OFFICE, ATTN: SFIM-AEC-WR  
(MR. OWENS), BUILDING 111, ROCKY MOUNTAIN ARSENAL, COMMERCE  
CITY, CO 80022-1748**

## **APPENDIX D**

### **Internal EPAS Team Meeting Planner**

*EMS Form #: EMS\_FBH\_10\_01*



**ENVIRONMENTAL  
MANAGEMENT SYSTEM  
USAG Baumholder**



**Internal EPAS Team Meeting Planner**  
(EMS Form #: EMS FBH 10 01)

Date of Meeting: *<Insert Date>*

Time of Meeting: *<Insert Time>*

Meeting Location: *<Insert Location>*

**Meeting called by:** *<Insert Name>*

**Type of meeting:** Internal EPAS Planning

**----- Agenda Topics -----**

Introductions All Participants *<Insert Time Limit>*

Discussion:

Conclusions:

Action items:

Person responsible:

Deadline:





**ENVIRONMENTAL  
MANAGEMENT SYSTEM  
USAG Baumholder**



**Internal EPAS Team Meeting Planner**

(EMS Form #: EMS FBH 10 01)

Purpose of Meeting

<Insert Name>

<Insert Time Limit>

Discussion:


Conclusions:

--

Action items:

Person responsible:

Deadline:

--	--	--

EPAS Requirements

<Insert Name>

<Insert Time Limit>

Discussion:


Action items:

Person responsible:

Deadline:

--	--	--

Roles and Responsibilities

<Insert Name>

<Insert Time Limit>

Discussion:


Conclusions:

--

Action items:

Person responsible:

Deadline:

--	--	--



**ENVIRONMENTAL  
MANAGEMENT SYSTEM  
USAG Baumholder**



**Internal EPAS Team Meeting Planner**  
(EMS Form #: EMS FBH 10 01)

**Media Area Assignments**

<Insert Name>

<Insert Time Limit>

Discussion:

---

---

Conclusions:

---

Action items:

Person responsible:

Deadline:

---

**EPAS Software v. 6.0**

<Insert Name>

<Insert Time Limit>

Discussion:

---

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Conclusions:

---

Action items:

Person responsible:

Deadline:

---

**Tentative Schedule**

All Participants

<Insert Time Limit>

Discussion:

---

---

Conclusions:

---

Action items:

Person responsible:

Deadline:

---



**ENVIRONMENTAL  
MANAGEMENT SYSTEM  
USAG Baumholder**



**Internal EPAS Team Meeting Planner**  
(EMS Form #: EMS FBH 10 01)

Wrap Up/Action Items

<Insert Name>

<Insert Time Limit>

Discussion:


Conclusions:

--

Action items:

--

Person responsible:

--

Deadline:

--

**Other Information**

**Special notes:**